BECEIVED CENTRAL FAX CENTER

T-015 P.008/008 F-397

APR 2 6 2006

PTO/SB/22 (12-04)
Approved for use through 07/31/2005, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARMENT OF COMMERCE

Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2008 (H.R. 4818).)		1038-1226 МІЅ:јЬ	
Application Number 10/088,569		Filed August 13, 2002	
For DNA IMMUNIZATION AGAINST CHLAMYDIA INFEC	TION		
Art Unit 1632		Examiner Joanne Hama	
This is a request under the provisions of 37 CFR 1.1 application.			i i
The requested extension and fee are as follows (che	ck time period desired	and enter the appropri	ate fee below):
	<u>Fee</u>	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
Two months (37 CFR 1.17(a)(2))	\$450	\$225	S
x Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ <u>1,020.00</u>
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	s
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFF	R 1.27.	n. (nn (nno) Ti 044)	1 00000034 192253 19088
A check in the amount of the fee is enclosed.		04/27/2006 TL0111	1 0000034 172233 1980
Payment by credit card. Form PTO-2038 is	attached.	01 FC:1253	1900.00 NH
The Director has already been authorized to	charge fees in this a	application to a Depo	osit Account.
The Director is hereby authorized to charge		•	
Deposit Account Number 182253			te copy of this sheet.
WARNING: Information on this form may become p Provide credit card information and authorization of		ation should not be inc	luded on this form.
I am the applicant/inventor.			
···		-0.074	
assignee of record of the enti- Statement under 37 CFR 3			
attorney or agent of record. R	• • •	•	
attorney or agent under 37 CF	R 1.34.		
Registration number if acting und	er 37 CFR 1.34		
hilme and	····	April 26, 2006	
Signature		Date	
Michael I. Stewart		(416) 849-8400	
Typed or printed name		Telephone Number	
IOTE: Signatures of all the inventors or assignees of record of the e ignature is required, see below,	mire interest or their represen	tative(s) are required. Submi	it multiple forms if more than one
	re submitted.		

This collection of information is required by 37 CFR 1.138(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form add/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and salect option 2.